



PART B - FEE(S) TRANSMITTAL

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23408 7590 03/21/2006

GARY C. COHN, PLLC
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<i>GARY C. COHN</i>	(Depositor's name)
<i>[Signature]</i>	
30 May 2006	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/823,044	04/12/2004	Philip John Gicsy	TSU 001	4101
TITLE OF INVENTION: EASY-TO-TURN COMPOST BIN			06/06/2006 SHASSEN2 00000008 10823044	
			01 FC:2501	700.00 OP
			02 FC:1504	300.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	06/21/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
REDDING, DAVID A		1744	071-009000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<i>GARY C. COHN PLLC</i>	
1 _____ 2 _____ 3 _____	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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 Advance Order - # of Copies _____

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A check in the amount of the fee(s) is enclosed.
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Authorized Signature _____

Date *30 May 2006*

Typed or printed name *GARY C. COHN*

Registration No. *30,456*

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